SERFF Tracking Number: CMBD-126767363 State: Arkansas State Tracking Number: Combined Insurance Company of America 46518 Filing Company:

Company Tracking Number: 801501-MSP-ISSUE

TOI: MS08I Individual Medicare Supplement -Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Senior 2010 Medicare Supplement Advertising

Project Name/Number: 2010 Medicare Supplement Advertising/801501-MSP-ISSUE

### Filing at a Glance

Company: Combined Insurance Company of America

Product Name: Senior 2010 Medicare SERFF Tr Num: CMBD-126767363 State: Arkansas

Supplement Advertising

TOI: MS08I Individual Medicare Supplement -SERFF Status: Closed-Filed-State Tr Num: 46518

Standard Plans 2010 Closed

Sub-TOI: MS08I.001 Plan A 2010 Co Tr Num: 801501-MSP-ISSUE State Status: Filed-Closed

Filing Type: Advertisement Reviewer(s): Stephanie Fowler

> Author: Sue Thill Disposition Date: 08/31/2010 Date Submitted: 08/17/2010 Disposition Status: Filed-Closed

Implementation Date Requested: 09/15/2010 Implementation Date:

State Filing Description:

### General Information

Project Name: 2010 Medicare Supplement Advertising Status of Filing in Domicile: Pending

Project Number: 801501-MSP-ISSUE Date Approved in Domicile: **Domicile Status Comments:** Requested Filing Mode: Review & Approval Explanation for Combination/Other: Market Type: Individual Group Market Size: Submission Type: New Submission

Overall Rate Impact: Group Market Type:

Filing Status Changed: 08/31/2010 Explanation for Other Group Market Type:

State Status Changed: 08/31/2010

Deemer Date: Created By: Sue Thill

Submitted By: Sue Thill Corresponding Filing Tracking Number:

Filing Description:

Combined Insurance Company of America

FEIN Number 36-2136262 NAIC Number 626-62146

Form Numbers:

801501-MSP-ISSUE - Advertising for Medicare Supplement Policy Form No.14910-AR-A,

Form No. 14911-AR-F and Form No. 14912-AR-N

801501-MSPWS-1 - Worksheet INDIVIDUAL MEDICARE SUPPLEMENT SERFF Tracking Number: CMBD-126767363 State: Arkansas
Filing Company: Combined Insurance Company of America State Tracking Number: 46518

Company Tracking Number: 801501-MSP-ISSUE

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Senior 2010 Medicare Supplement Advertising

Project Name/Number: 2010 Medicare Supplement Advertising/801501-MSP-ISSUE

The above captioned advertisement and worksheet are attached for your consideration.

The filing fee, in the amount of \$100.00, was provided through EFT.

Form Nos. 801501-MSP-ISSUE and 801501-MSPWS-1 are new which will not replace any existing forms. The advertising will be used by our agents in the field for the following forms.

Form Numbers Description Approval Date SERFF Tracking/State Tracking #

14910-AR-A Plan A August 3, 2010 CMBD-126734449/46289 14911-AR-F Plan F August 3, 2010 CMBD-126734449/46289 14912-AR-N Plan N August 3, 2010 CMBD-126734449/46289 149276 Application August 3, 2010 CMBD-126734449/46289

The advertising was filed with our Domicile State, Illinois, on August 16, 2010.

Thank you for your review and hopefully approval.

### **Company and Contact**

#### Filing Contact Information

Sue Thill, Senior Policy Analyst

Sue.A.Thill@combined.com

1000 Milwaukee Avenue

847-953-1536 [Phone]

Glenview, IL 60025

847-953-1557 [FAX]

**Filing Company Information** 

Combined Insurance Company of America CoCode: 62146 State of Domicile: Illinois

1000 Milwaukee AvenueGroup Code: 626Company Type:Glenview, IL 60025Group Name:State ID Number:

(847) 953-1531 ext. [Phone] FEIN Number: 36-2136262

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### **Filing Fees**

Fee Required? Yes
Fee Amount: \$100.00
Retaliatory? No

SERFF Tracking Number: CMBD-126767363 State: Arkansas

Filing Company: Combined Insurance Company of America State Tracking Number: 46518

Company Tracking Number: 801501-MSP-ISSUE

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Senior 2010 Medicare Supplement Advertising

Project Name/Number: 2010 Medicare Supplement Advertising/801501-MSP-ISSUE

Fee Explanation: 2 ADVERTISEMENTS X \$50 = \$100

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Combined Insurance Company of America \$100.00 08/17/2010 38820157

 SERFF Tracking Number:
 CMBD-126767363
 State:
 Arkansas

 Filing Company:
 Combined Insurance Company of America
 State Tracking Number:
 46518

Company Tracking Number: 801501-MSP-ISSUE

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Senior 2010 Medicare Supplement Advertising

Project Name/Number: 2010 Medicare Supplement Advertising/801501-MSP-ISSUE

### **Correspondence Summary**

### **Dispositions**

Status	Created By	Created On	Date Submitted
Filed-Closed	Stephanie Fowler	08/31/2010	08/31/2010

 SERFF Tracking Number:
 CMBD-126767363
 State:
 Arkansas

 Filing Company:
 Combined Insurance Company of America
 State Tracking Number:
 46518

Company Tracking Number: 801501-MSP-ISSUE

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Senior 2010 Medicare Supplement Advertising

Project Name/Number: 2010 Medicare Supplement Advertising/801501-MSP-ISSUE

### **Disposition**

Disposition Date: 08/31/2010

Implementation Date: Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: CMBD-126767363 State: Arkansas

Filing Company: Combined Insurance Company of America State Tracking Number: 46518

Company Tracking Number: 801501-MSP-ISSUE

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Senior 2010 Medicare Supplement Advertising

Project Name/Number: 2010 Medicare Supplement Advertising/801501-MSP-ISSUE

Schedule Item Schedule Item Status Public Access

FormADVERTISEMENTFiledYesFormWORKSHEETFiledYes

 SERFF Tracking Number:
 CMBD-126767363
 State:
 Arkansas

 Filing Company:
 Combined Insurance Company of America
 State Tracking Number:
 46518

Company Tracking Number: 801501-MSP-ISSUE

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Senior 2010 Medicare Supplement Advertising

Project Name/Number: 2010 Medicare Supplement Advertising/801501-MSP-ISSUE

### Form Schedule

Lead Form Number: 801501

Schedule	Form	Form Type Form Name	Action	Action Specific	Readability	Attachment
Item	Number			Data		
Status						
Filed	801501-	Advertising ADVERTISEMENT	Initial			801501-MSP-
08/31/2010	MSP-					ISSUE.pdf
	ISSUE					
Filed	801501-	Advertising WORKSHEET	Initial			801501-
08/31/2010	MSPWS-1					MSPWS-1.pdf



# Let's make this easy.



### MEDICARE SUPPLEMENT

Medicare alone was not designed to cover all expenses for necessary medical treatment and services. And, out-of-pocket costs for Medicare recipients go up every year - deductibles, copayments, premiums and missing benefits can all increase. These gaps in coverage are your responsibility to pay, which can lead to financial hardship.

If you are, or will be on Medicare and you need medical services or treatment, you will most likely need some help. Combined Insurance can help fill in some of the "gaps" in Medicare coverage with a simple supplemental insurance policy - Medicare Supplement coverage.

> ON AVERAGE, IN 2005 MEDICARE PAID LESS THAN HALF OF TOTAL MEDICAL EXPENSES PER BENEFICIARY.(1)



(1) Medicare: Medicare Spending and Financing. The Henry J. Kaiser Family Foundation. May 2009.





### COMBINED INSURANCE HAS BEEN PROVIDING QUALITY INSURANCE PRODUCTS IN THE U.S. SINCE OUR FOUNDING IN 1922.

Combined Insurance has provided Medicare Supplement coverage since 1988 and paid out nearly \$1 billion in claims for these policyholders alone.<sup>(1)</sup>

Combined Insurance offers a choice of three different standardized Medicare Supplement policies. It is important for you to know what traditional Medicare covers and where the gaps exist - this way you can more easily determine which plan is best for you.

Let's see how a Medicare Supplement plan from Combined Insurance can help fill in the "gaps" in your Medicare coverage.

### Original Medicare Part A covers...(1)

Medicare Eligible Hospital Expenses for semi-private room and board, general nursing, and miscellaneous services and supplies during each benefit period. (2)

What you pay with Medicare alone		Your out-of-pocket costs with plan A F N		
For the first 60 days (Part A deductible)	\$	\$	\$0	\$0
From 61st thru 90th day	\$ a day	\$0	\$0	\$0
From 91st through 150 days (60 Lifetime Reserve Days)	\$ a day	\$0	\$0	\$0
For additional 365 days	All costs	\$0	\$0	\$0
Beyond additional 365 days	All costs	All costs	All costs	All costs
Blood — first three pints (not replaced)	All costs	\$0	\$0	\$0
Hospice Care Copay (for Inpatient Respite Care)	5%	\$0	\$0	\$0

**Skilled Nursing Care** in a Medicare-certified nursing facility, when received within 30 days of a three day Medicare approved hospital stay.

What you pay with Medicare alo	Your out-of-p	oocket costs with plan F N		
For the first 20 days	\$0	\$0	\$0	\$0
From the 21st thru 100th day	\$a day	\$a day	\$0	\$0
Beyond 100 days	All costs	All costs	All costs	All costs

### Notes:

- (1) Part A and B benefits shown herein are current as of January, \_\_\_\_\_.
- (2) "Benefit Period" means a period starting on the first day of covered Hospital confinement, and ending on the 60th consecutive day you are not confined in a Hospital (as defined by Medicare).

### **Original Medicare Part B covers...**

**Medical Care** for Medicare-approved physician services, in and outpatient medical & surgical services and supplies, physical and speech therapy, diagnostic tests, and durable medical equipment.<sup>(3)</sup>

What you pay with Medicare alone		Your out-of-pocket costs with plan A F N		
Part B annual deductible	\$	\$	\$0	\$
Remainder of Medicare approved charges (Part B coinsurance)	20%	\$0	\$0	\$0
Part B Office Visit Copay <sup>(4)</sup>	20%	\$0	\$0	Up to \$
Part B Emergency Room Copay <sup>(4)</sup>	20%	\$0	\$0	Up to \$
Part B excess charges	All costs	All costs	\$0	All costs
Blood — first three pints (not replaced)	All costs	\$0	\$0	\$0

**Foreign Travel** for medically necessary emergency care during the first 60 days of each trip outside of the U.S. for care that would have been covered by Medicare if provided in the U.S.<sup>(5)</sup>

What you pay with Medicare alone		Your out-of-p	oocket costs w F	ith plan N
First \$250 per year	All costs	\$250	\$250	\$250
Remainder of charges	All costs	All costs	20%	20%

- (3) Diagnostic laboratory work for Medicare-approved blood tests is paid in full by Medicare.
- (4) Copayment amounts apply after the Part B Deductible has been met.
- (5) The Foreign Travel benefit is subject to a Lifetime Maximum of \$50,000.





## Combined Insurance makes choosing a Medicare Supplement policy easy.

#### **PRICING**

Premium prices are based on your age at the time the policy is issued. While premiums may be increased on a class basis or due to changes in benefits, your premium will not increase just because you get older. The lowest premium price for an individual Medicare Supplement policy will always be now.

#### **SERVICE**

Unlike many other companies, Combined Insurance works with you face-to-face. Our agents work directly with you in person to understand your needs and make choosing the appropriate coverage simple.

And you generally don't need to fill out claim forms. Combined Insurance works with your hospital, doctor's office or other healthcare provider to help get the forms completed for you.

Our agents are happy to come to your home, whenever possible, to help you better understand your insurance.

Combined Insurance also has a dedicated customer service phone number for all Medicare Supplement policyholders so they can speak with someone well versed in all of our policies.







## Combined Insurance's Medicare Supplement policies are an outstanding value.

- Pre-existing conditions are covered and covered immediately. There is no waiting period and no reduction in benefits for pre-existing conditions.
- Your Medicare Supplement coverage can be purchased to go into effect the moment you qualify for Medicare immediately upon your 65th birthday.
- You are not locked into any network.
   Combined Insurance Medicare Supplement policyholders choose their own doctors and hospitals.

### What's not covered...

#### **EXCLUSIONS**

Combined Insurance's Medicare Supplement policies do not cover or pay for:

- (1) Services rendered by or covered by any agency of a State government (except Medicaid), when you have no obligation to pay for such services; or
- (2) Expenses covered and payable under Medicare.

### MEDICARE DEDUCTIBLE AND COPAYMENT CHANGES

If Medicare changes its deductible and copayment amounts, the policy benefits will also change. When this happens, your renewal premium may increase. Premiums may also change at other times, on a class basis, subject to Insurance department approval.

#### RENEWABILITY

Combined Insurance guarantees it will renew this policy for your lifetime (so long as the required premium is paid). Combined Insurance reserves the right to change the premium. Any change in premium will be made on all policies of the same class.

#### **30 DAY TRIAL**

If you are not satisfied with the policy for any reason, you may cancel your policy within 30 days of the effective date and still receive a full refund.

#### **DEFINITIONS**

"Hospital" means an institution which is defined as such by Medicare. It does not include any facility not covered by Medicare.

"Excess Charges" (Only available under Plan F) is the difference between the Medicare Part B approved expense and the amount charged by the attending physician, which can be no more than the limiting charge allowed by Medicare.



#### 8

### Combined Insurance is not connected with the U.S. government or the federal Medicare program.

**NOTE:** This brochure contains a brief description of policy benefits for the following policy form numbers:

Plan A: Series 14910-A; Plan F: Series 14911-F; and Plan N: Series 14912-N.

See the policy for complete details of policy benefits and exclusions and definitions.

This is supplemental insurance. It is not a substitute for hospital or medical expense insurance, a health maintenance organization (HMO) contract, or major medical expense insurance.

Combined Insurance Company of America • 111 East Wacker Drive, Suite 700, Chicago, IL 60601
The ACE Group of Companies

5 ways a Medicare Supplement plan can help you get the care you need.

### 1. NO PRE-EXISTING CONDITION LIMITATIONS OR WAITING PERIODS:

Pre-existing conditions are covered immediately.

## 2. CHOOSE YOUR OWN DOCTORS AND OTHER HEALTH CARE PROVIDERS:

Benefits are paid directly to them. There is no "Gatekeeper."

### 3. NO CLAIM FORM IS REQUIRED:

The Explanation of Medicare Benefits (EOMB) and the policy number is all that is needed, in most cases.

4. A CHOICE OF PLAN OPTIONS... so you can find the right plan to fit your needs.

### 5. CONVENIENT CUSTOMER SERVICE:

Through a dedicated customer service representative, toll-free; or, when possible, in-home by licensed professionals who will answer your questions.

MEDICARE SUPPLEMENT IS THE CLEAR AND EASY PLAN THAT'S RIGHT FOR YOU



Home Office: 111 E. Wacker, Suite 700, Chicago, IL 60601 Toll-Free: 800-544-5531 www.combinedinsurance.com

### Medicare Supplement coverage worksheet

Prepared for	Date		
Agent			
DETERMINE WHICH PLAN IS RIGH	IT FOR YOU:		
	PLAN A	PLAN F	PLAN N
You  Name  M	\$	\$	\$
Spouse Name  M	\$	\$	\$



**TOTAL MONTHLY COST** 

IMPORTANT: This worksheet is for illustration purposes only. It is not part of the policy. Please see the policy for the plan selected for any information concerning policy benefits and exclusions / limitations.

801501-MSPWS-1 (Rev. 8/10)

### What's not covered...

#### **Exclusions**

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- (1) Services rendered by or covered by any agency of a State government (except Medicaid), when you have no obligation to pay for such services; or
- (2) Expenses covered and payable under Medicare.

#### **Definitions**

"Hospital" means an institution which is defined as such by Medicare. It does not include any facility not covered by Medicare.

"Excess Charges" (Only available under Plan F) is the difference between the Medicare Part Bapproved expense and the amount charged by the attending physician, which can be no more than the limiting charge allowed by Medicare.

### **Medicare Deductible and Copayment Changes**

If Medicare changes its deductible and copayment amounts, the policy benefits will also change. When this happens, your renewal premium may increase. If your policy is attained age rated your premiums will increase each year as you age.

### Renewability

Combined Insurance guarantees it will renew this policy for your lifetime (so long as the required premium is paid). Combined Insurance reserves the right to change the premium. Any change in premium will be made on all policies of the same class.

### **30 Day Trial**

If you are not satisfied with the policy for any reason, you may cancel your policy within 30 days of the effective date and still receive a full refund.

### Combined Insurance is not connected with the U.S. government or the federal Medicare program.

**NOTE:** This worksheet contains a brief description of policy benefits for the following policy form numbers: Plan A: Series 14903-A or 14910-A; Plan F: Series 14905-F or 14911-F; and Plan N: Series 14906-N or 14912-N. See the policy for complete details of policy benefits and exclusions and definitions.

This is supplemental insurance. It is not a substitute for hospital or medical expense insurance, a health maintenance organization (HMO) contract, or major medical expense insurance.



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